



Presentation 1:
***The Public Health Community Platform &
Electronic Case Reporting***
Presenter: Marcus Rennick


Presentation 2:
APHL Informatics Messaging Services (AIMS)
Presenter: Eduardo Gonzalez Loumiet

Public Health - EHR Vendors Collaboration Initiative
July 19, 2016

Public Health – EHR Vendors Collaboration Initiative

URL: <http://wwwdev.cdc.gov/ehrmmeaningfuluse/public-health-ehr-vendors-collaboration-initiative.html>

U
CC



CDC Centers for Disease Control and Prevention
CDC 24/7: Saving Lives, Protecting People™

SEARCH

CDCA-Z INDEX

Meaningful Use

Meaningful Use

- Introduction
- Calendar
- Connect with Others
- CDC Meaningful Use ListServ
- Meaningful Use Community
- Public Health – EHR Vendors Collaboration Initiative**
- Joint Public Health Forum & CDC Nationwide
- Meaningful Use (MU) Public Health (PH) Reporting Requirements Task Force
- ELR Task Force
- Jurisdiction Meaningful Use Websites
- S & I Framework
- Reportable Conditions Knowledge Management System
- External Links
- Frequently Asked Questions
- Public Health Options
- Resources
- Spotlight Archive

Meaningful Use

CDC • Meaningful Use • Connect with Others • Meaningful Use Community

Public Health – EHR Vendors Collaboration Initiative

[f](#) [t](#) [+](#)

Community Profile

The Centers for Disease Control & Prevention in collaboration with the Office of the National Coordinator for Health IT (ONC) lead the Public Health (PH) - Electronic Health Records (EHR) Vendors Collaboration Initiative. The initial focus of this initiative is on meeting Stage 1 and 2 Meaningful Use public health objectives. Public Health Practitioners and EHR Vendors from across the nation are participating in this initiative.

If you are interested in joining this initiative, please follow the instructions provided below to register for these monthly webinars. If you want to submit an issue/question, please send an email to meaningfuluse@cdc.gov and include "Public Health - EHR Vendor Collaboration Initiative" in the subject line

Meeting Schedule and Webinar Information

Meeting Schedule:

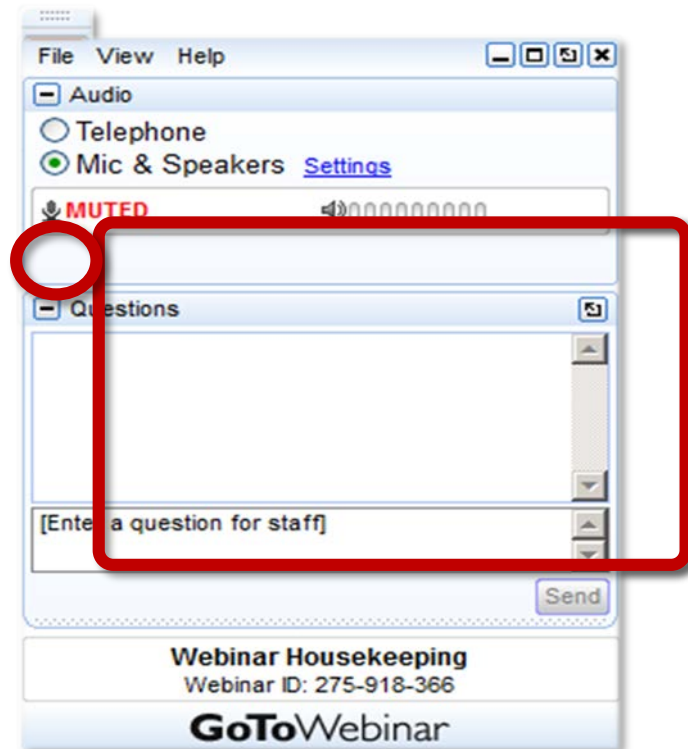
Date: 3rd Tuesday of each month
Time: 1:00-2:30 PM ET / noon 1:30 PM CT / 11:00 AM - 12:30 PM MT / 10:00-11:30 AM PT

Webinar Information

- GoToWebinar will now be used for these webinars and pre-registration for this event is required. Please follow the registration instructions listed below to receive instructions on how to join this webinar.
- Your registration will be valid for all of the currently scheduled monthly meetings.
- The instructions you receive will include a link to add these recurring meetings to your calendar.

Question and Answer Session

How to submit or ask questions for the panel members?



Submit or Ask Questions

Submit your text question and comments using the Question Panel

Please raise your hand to be unmuted for verbal questions.

The Public Health Community Platform & Electronic Case Reporting

Marcus Rennick
mrennick@astho.org



Public Health Community Platform

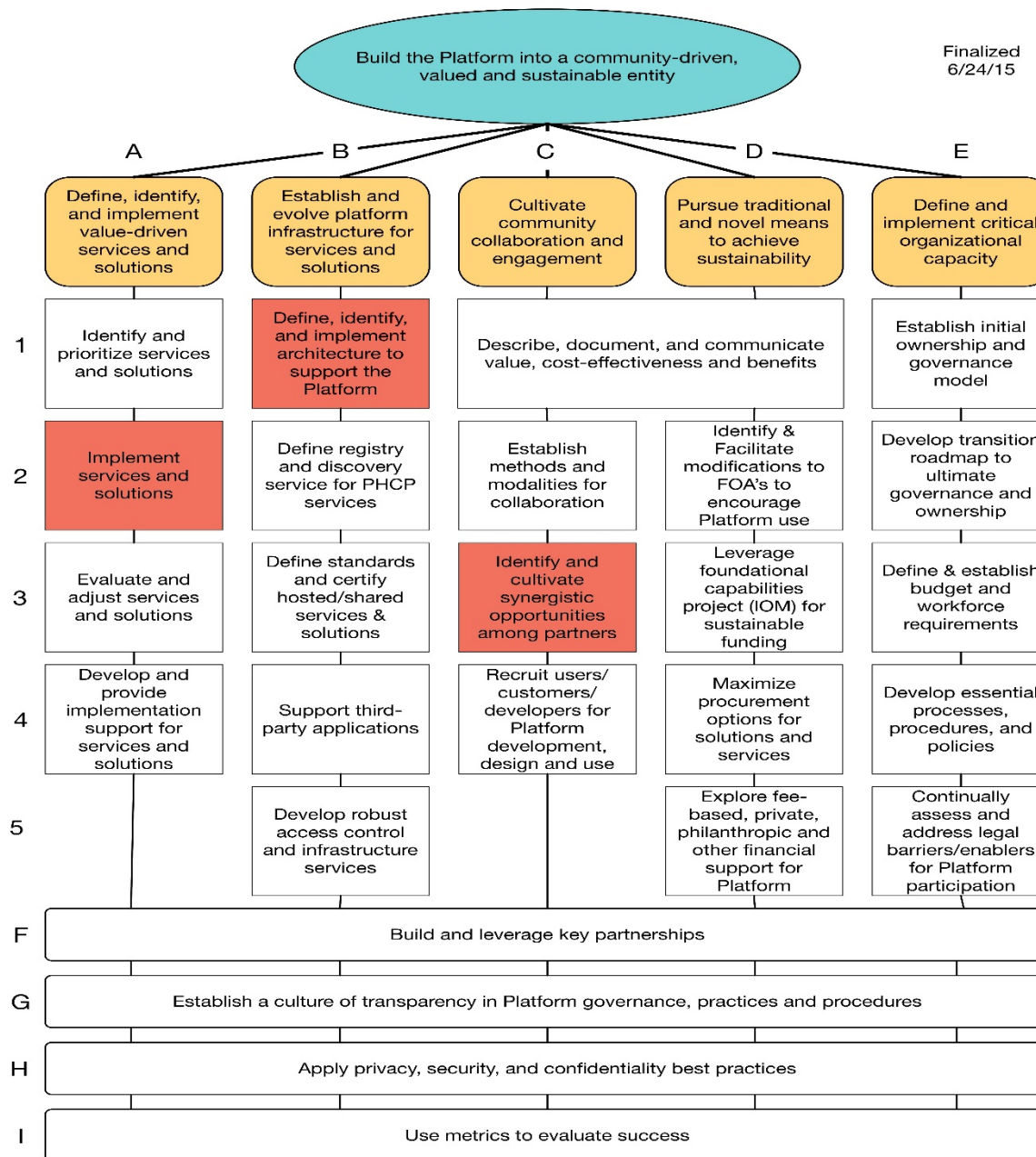
■ Vision

Universal access to modernized shared resources that efficiently, securely, and collaboratively transform data into action for a healthier nation.

■ Mission

Provide an accessible, flexible, and secure public health information technology platform of interoperable shared solutions governed by and responsive to the public health community that enables user-driven development, implementation, collaboration, and effective use of resources to address public health priorities.

Finalized
6/24/15



Glossary and Actors

ASTHO= Association of State and Territorial Health Officials

PHCP= Public Health Community Platform

APHL= Association of Public Health Laboratories

AIMS= APHL Informatics Messaging Service

CSTE= Council of State and Territorial Epidemiologist

RCKMS= Reportable Condition Knowledge Management System (Public Health Decision Support)

eCR= electronic case reporting of reportable conditions



eICR= HL7 CDA document

RCTC= Reportable Conditions Trigger Codes

eCR Components

- Standardized initial report for *all jurisdictions* and *all reportable conditions*
- National Trigger Set for *all jurisdictions* and *all reportable conditions* to initiate the case report generation
- Public Health Decision Support to evaluate the initial report against *jurisdiction specific* and *condition specific* rules
- Standard Transport Mechanisms

Value Proposition

	Data Senders (Providers and Facilities)	Data Receivers (Public Health Agencies)
	<ul style="list-style-type: none"> • compliance with public health reporting laws • transparency of patient data provisioning • awareness of potential public health follow-up • standardization of initial reporting data elements 	<ul style="list-style-type: none"> • disease reporting timeliness and completeness • public health intervention and prevention activity • focus on epidemiologic data (risk factors, exposure) • ability to share case information interjurisdictionally • capacity to leverage shared tools and solutions • community-driven platform development
	<ul style="list-style-type: none"> • person-resources for reporting • “one-off” public health reporting tracking process • interruptions by public health investigators • training time of medical record and office staff 	<ul style="list-style-type: none"> • technical solutions for data reporting process • person-resources for data collection • redundancy in system development projects

eCR Component Status

Current State	Next Step
<p>eICR HL7 Standard:</p> <ul style="list-style-type: none"> • Draft eICR Standard Published (STU) [http://www.hl7.org/dstUcomments/showdetail.cfm?dstuid=188] • Sample eICR documents for select conditions [http://www.thephcp.org/committees/case-reporting] 	<p>eICR HL7 Standard:</p> <ul style="list-style-type: none"> • Notice of Reportability Implementation Guide • Update version of CCDA to address “future plans” comments • FHIR Implementation Guide for eICR
<p>Reportable Conditions Trigger Codes:</p> <ul style="list-style-type: none"> • Universal code set for all reportable conditions in all jurisdictions (lab order, result, diagnosis) • Pertussis, salmonellosis, gonorrhea, chlamydia, Zika • Published in PHIN VADS in May 2016 [https://phinvads.cdc.gov/vads/SearchVocab.action] 	<p>Reportable Conditions Trigger Codes:</p> <ul style="list-style-type: none"> • Explore implementation with EHR vendors • CSTE continue identify / vet codes • Certification guidance from ONC ~summer 2016
<p>RCKMS:</p> <ul style="list-style-type: none"> • Decision tool with default criteria for 5 base conditions • Draft tool being integrated into PHCP eCR workflow on AIMS [http://www.cste.org/group/RCKMS] 	<p>RCKMS:</p> <ul style="list-style-type: none"> • Launch reporting requirements authoring interface • Pilot decisions support tool with 5 conditions

eCR Implementation Options

Triggers - Any reportable condition in any jurisdiction

At Clinical
Organization

Deploy PH Decision Support
Tool (e.g., RCKMS, ESP) to
determine reportability before
sending eICR to PH

Intermediary

Use decision support housed on intermediary to confirm
reportability:
Option 1: Centralized PH Decision Support tool (RCKMS)
Option 2: External PH decision support/tool (e.g., RCKMS, ESP
@ HIE)

Route eICR to appropriate jurisdiction(s)

PHA

Receive eICR directly and confirm reportability

Options to confirm reportability

- Option 1: Run PH decision support tool (e.g., RCKMS, ESP) locally at PH
- Option 2: Manual inspection
- Option 3: Call PH decision support as a centralized web service

Receive eICR

From CDC presentation to CSTE ELDRS WG on 4/20/2016

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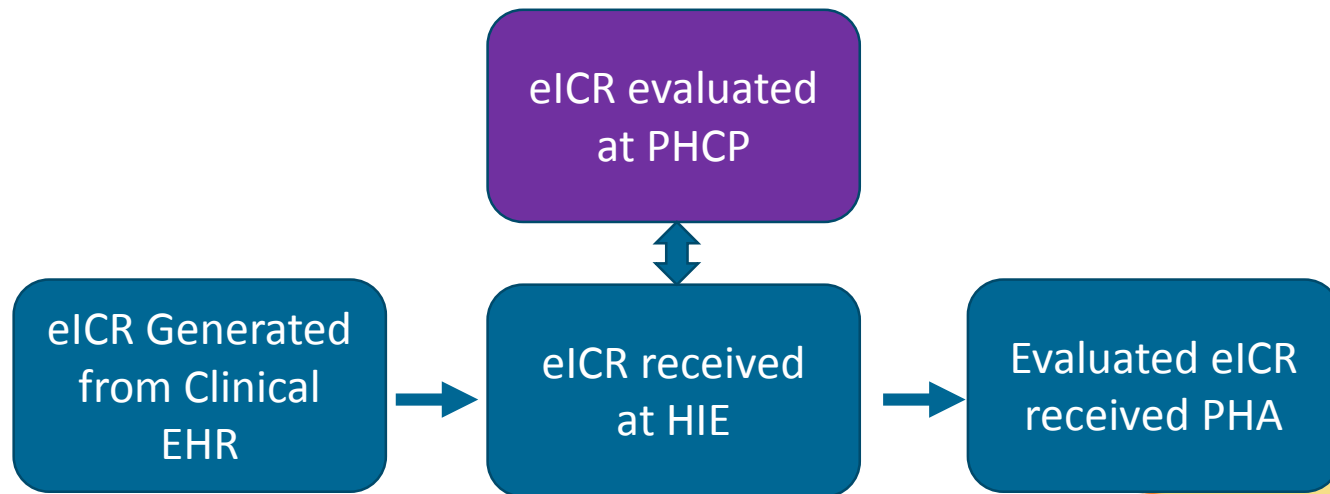
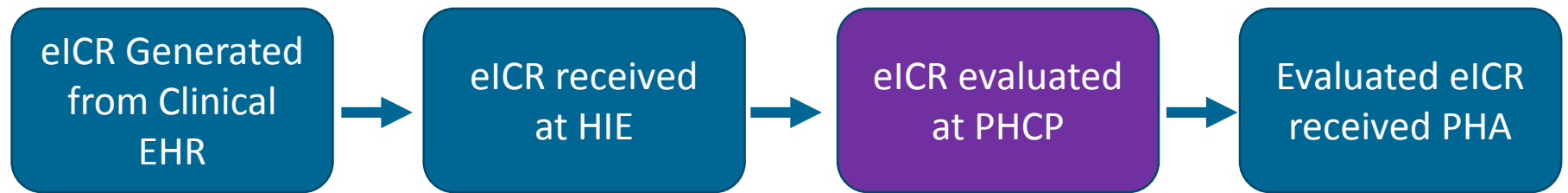
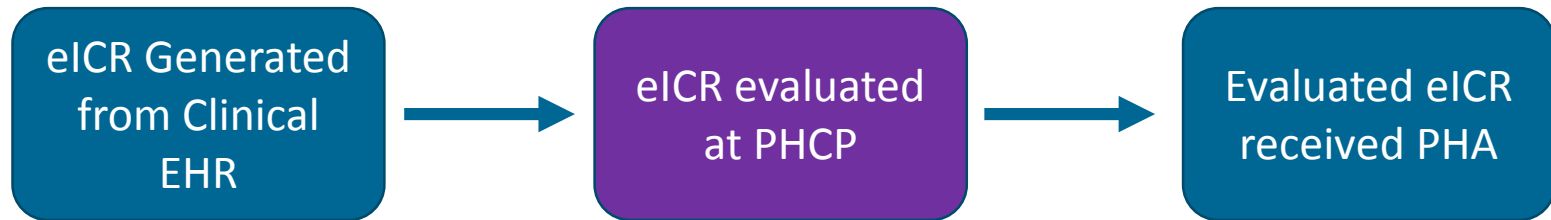
Receive eICR directly and confirm reportability

Options to confirm reportability

- Option 1: Run PH decision support tool (e.g., RCKMS, ESP) locally at PH
- Option 2: Manual inspection
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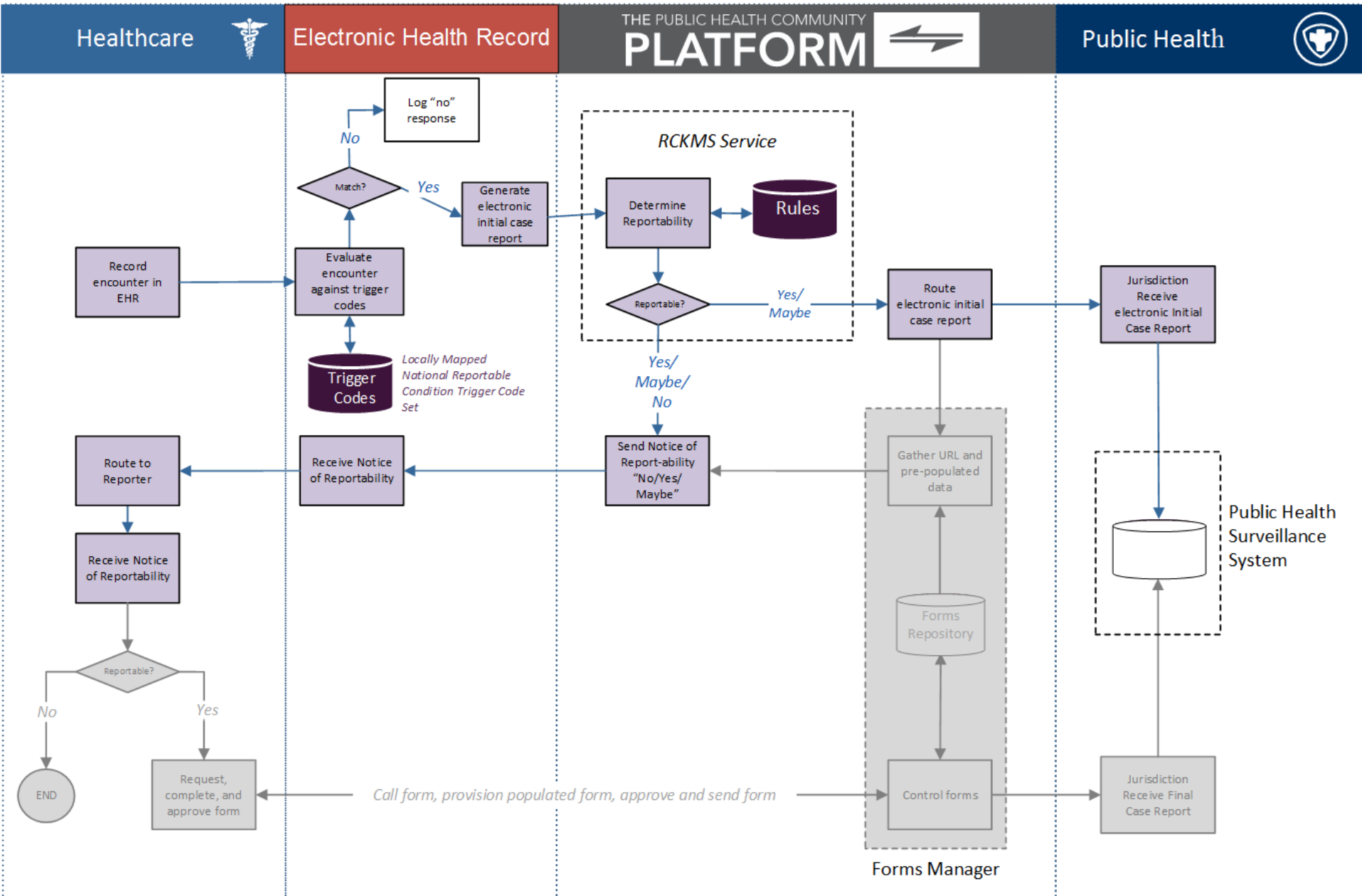
Receive eICR

From CDC presentation to CSTE ELDRS WG on 4/20/2016



Initial eCR data flow from EHR to Public Health Use Case

Revised: 11/14/15



eCR Pilots

eCR Pilot Scope

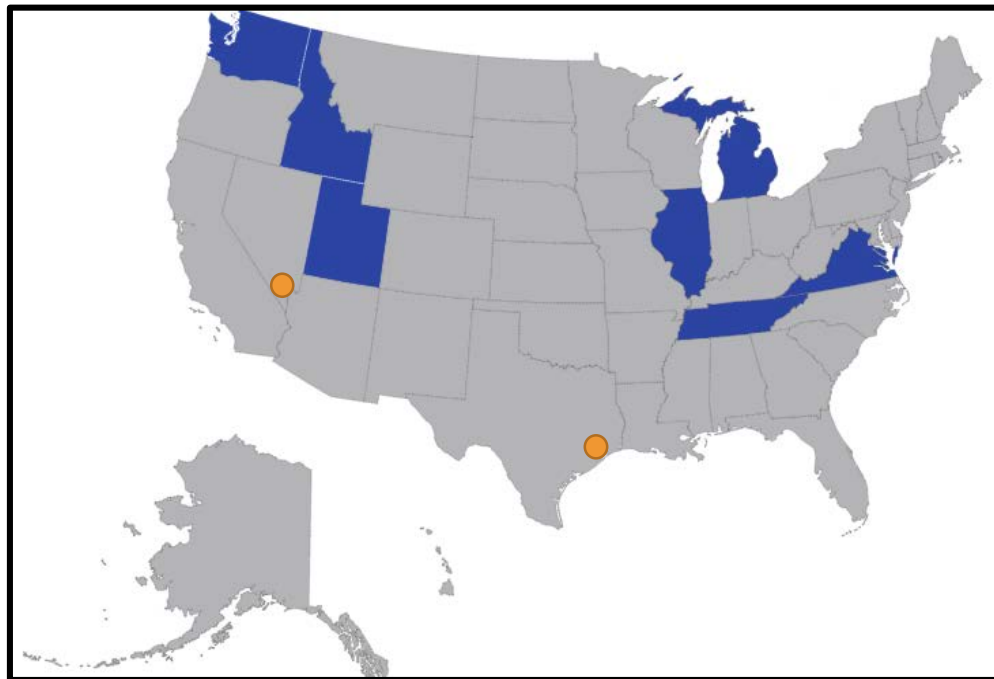
- Define the requirements for system integration between the PHCP, EHR system and the PHA system.
- The pilot teams will help to identify the requirements, test the integration points, and validate success.
- Additionally, this project scope will align with the emerging standards in Meaningful Use Stage 3, allowing for vendor certification to MU stage 3 requirements.

eCR Pilot Objectives

- Define and document the requirements for system connectivity between the PHCP, EHR system and the PHA system.
- Demonstrate the integration of subset of trigger codes into EHR.
- Test data transmission with test data from EHR to PHCP and PHCP to PHA.
- Securely transport case reports for selected diseases from production EHR system in a CCDA format to the PHCP/AIMS containing agreed upon data elements and then successful transport the electronic initial case report to the PHA.
- Validate received cases at PHA against normal reporting.

eCR Pilots

- Initial Pilot- Complete Framework of transporting case report from clinical EHR to PHA
 - Utah DOH/Intermountain Healthcare/Cerner
 - Illinois DPH/Northshore Medical Group/Epic
- Secondary Pilot- Transport and integration of eICR from PHCP to PHA



Next Steps

Continue discussion of topics with EHR implementers on calls over the Summer

Email ehrmeaningfuluse@cdc.gov to request participation

Implementation Topics in EHRs

1. Where in the EHR workflow would codes be looked for?
2. Timing of when the EHR looks for a match to the RCTC?
3. What defines an encounter, does it differ based on care setting.
4. Generation of eICR – how many reports will be generated for each condition, one for all conditions?
5. Once an eICR is sent for an encounter, what should initiate an updated report?
6. More....

APHL Informatics Messaging Services (AIMS) July 19, 2016

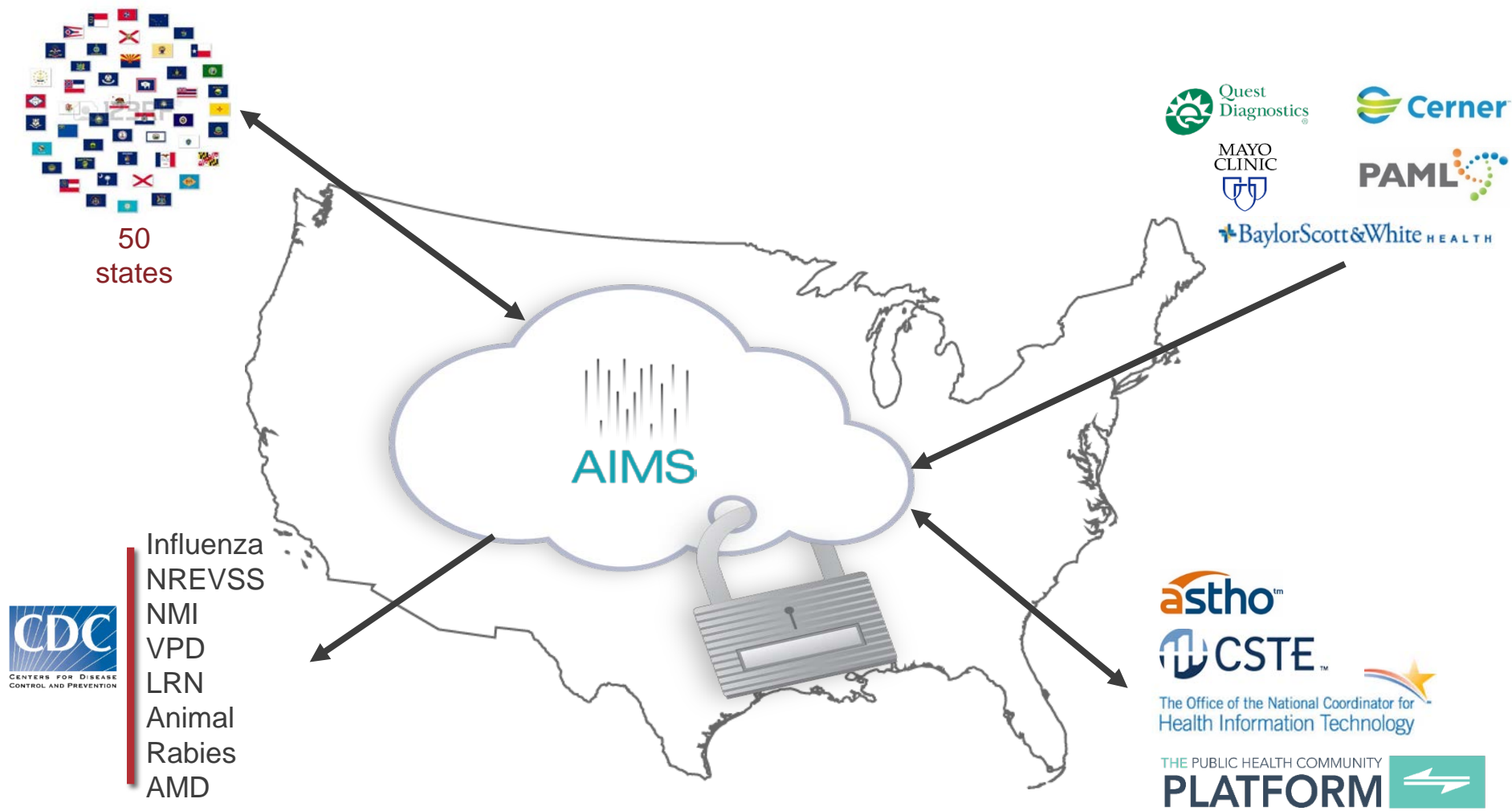
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PLATFORM



APHL Informatics Messaging Services

A **secure, cloud based** environment that accelerates the implementation of health messaging by providing shared services to aid in the **transport, validation, translation and routing** of electronic data.

Today: A National Resource for Interoperability



Influenza
NREVSS
NMI
VPD
LRN
Animal
Rabies
AMD



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Priorities

Legal • Continuity • Security • Compliance • Technical Support

Speed and Agility

Elasticity

Low cost of experimentation

Easily deployable solutions



Cybersecurity



Automated continuous configuration and **monitoring** provides cybersecurity and information assurance capabilities to information technology environments on AIMS.

Compliance

- ✓ HIPAA-compliant, HITRUST-certified environment on the AWS Cloud.
- ✓ FedRAMP and NIST 800-53
- ✓ Business Associate Agreements
- ✓ Shared Responsibility Model
- ✓ System Security Plan (SSP) in place
- ✓ Security Assessment (ST&E) and Audit conducted in 2013 by RTI International and in 2016 by A-LIGN.
- ✓ FISMA Moderate Compliance ATO granted in 2013
- ✓ FedRAMP certified environment

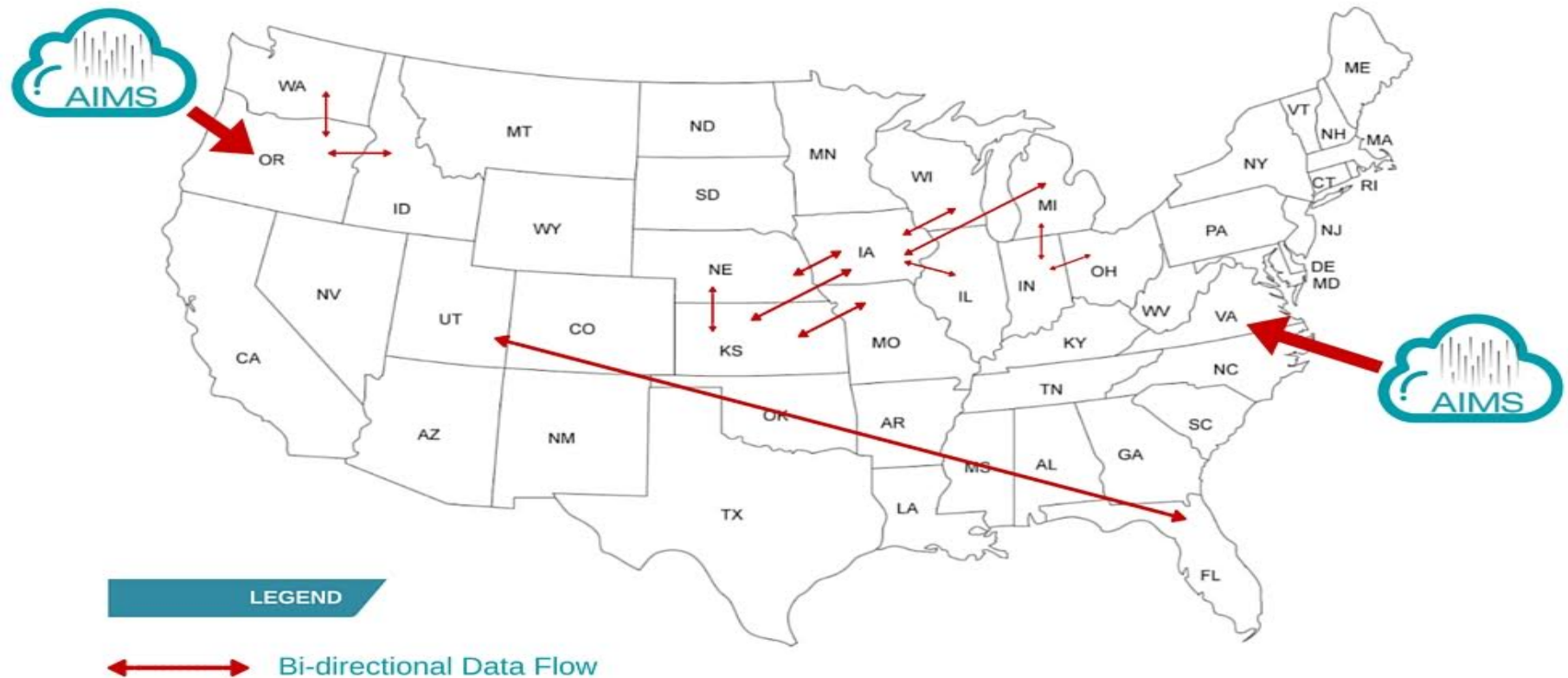


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Empowering States: Cross-Jurisdictional Data Exchange



Organic ELR Data Exchange

Private Sector Adoption



10 States receiving ELR via AIMS



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Traction

>3.5M

Messages and
Counting



>5M

Securely Monitored
Log files

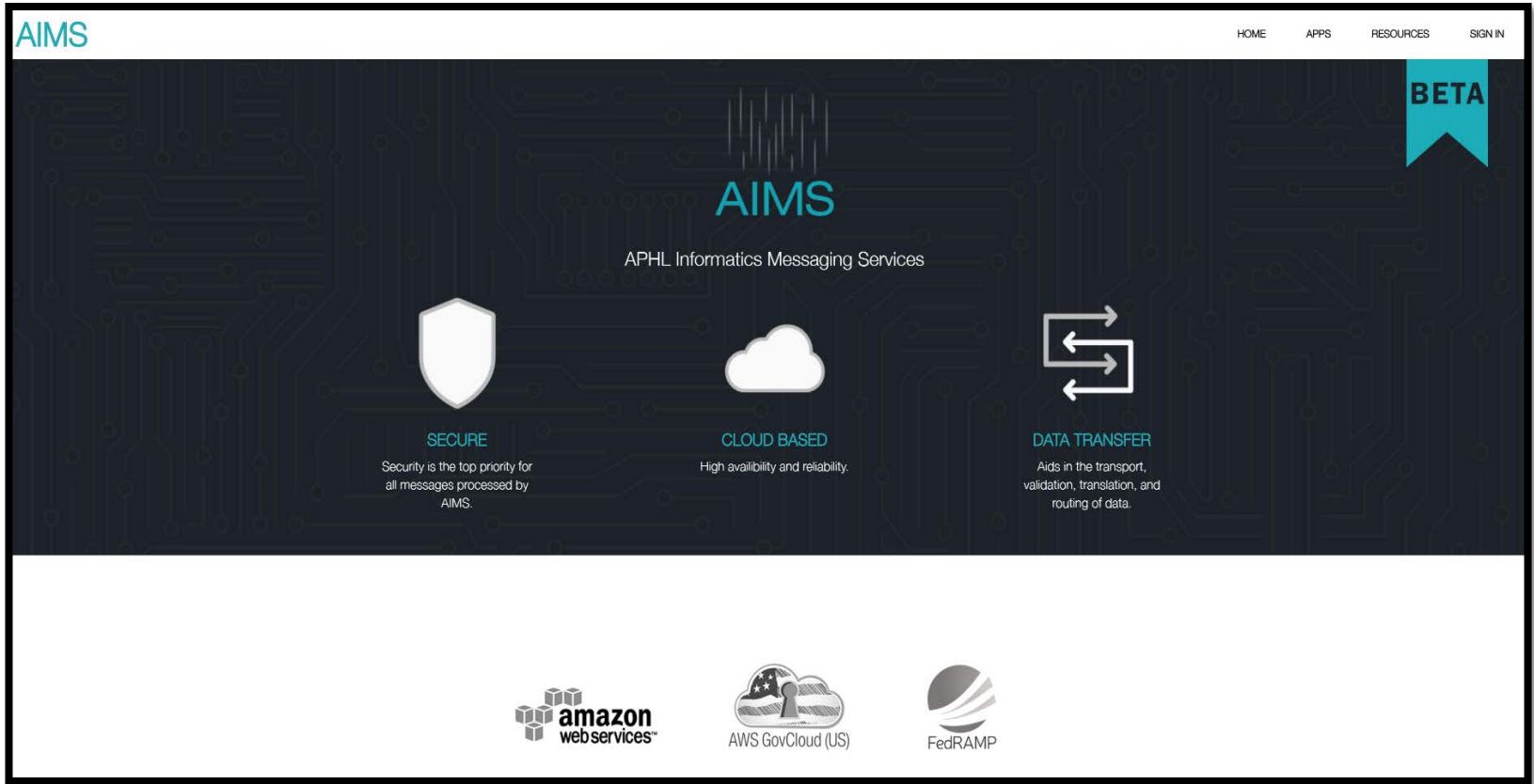


80

AIMS Trading
Partners



AIMSPlatform.com



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AIMS Functional Architecture



Platform Applications



Hosted Solutions

Route-
Not-Read

Web
Services

SFTP

ELR

Hosting

Transport
Interop

Message
Routing

Message
Transform

DB

Backups

Disaster
Recovery

Services



Systems Management

Security & Information Assurance

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Compute



Storage &
Content Delivery



Databases



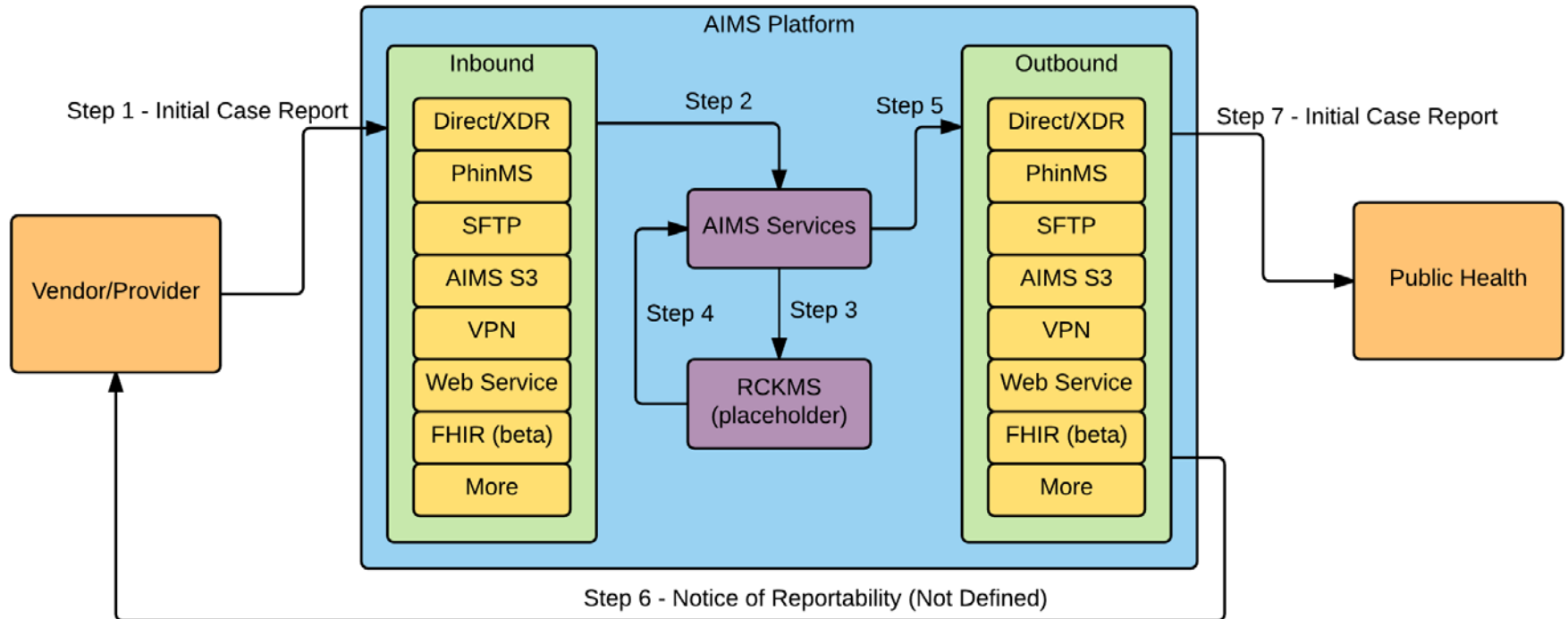
Networking



Administration &
Security



eICR Workflow



Test Cases

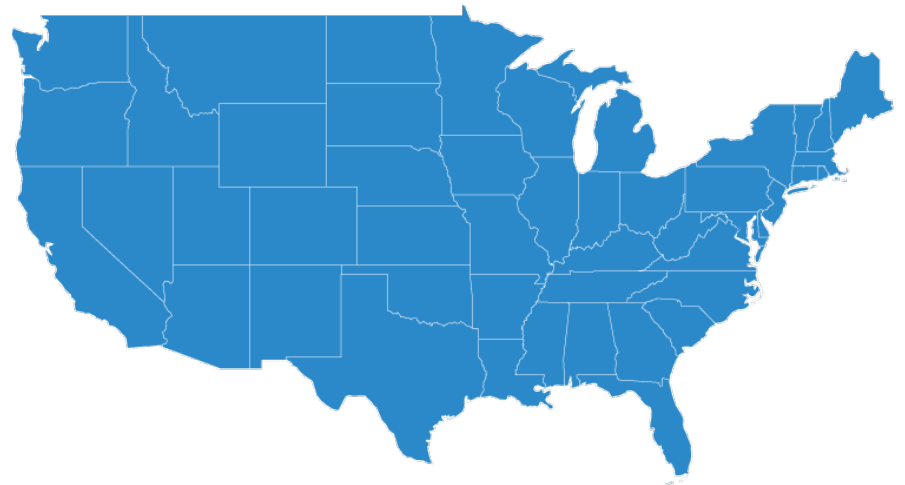
- Chlamydia
- Gonorrhea
- Pertussis
- Salmonellosis
- Zika*



Pilot

Working with:

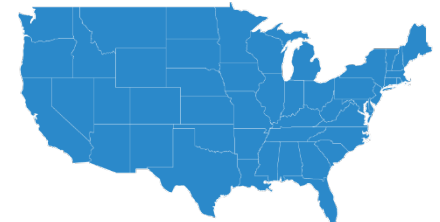
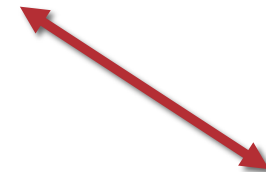
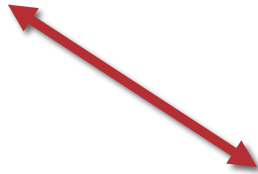
1. Utah
2. Illinois
3. Washington
4. Michigan
5. Idaho
6. Tennessee
7. Southern Nevada
8. Virginia
9. Houston



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Working with: Cerner



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Working with:



REPORTABLE CONDITION KNOWLEDGE MANAGEMENT SYSTEM (RCKMS)

A screenshot of the RCKMS web application. The interface has a blue header with the "RCKMS" logo on the left and "RCKMS Home" and "Language" on the right. A sidebar on the left shows "You selected Jurisdictions" with "Colorado" selected, and a menu with "Summary" and "Links & References" (the latter is active). The main content area is titled "Links and References" and "Pertussis". Below this, it says "Colorado | Reporting Requirements for Healthcare provider | Release Date 2012-10-01". A toolbar contains icons for "Download Data", "Case Report Form", "Email This Page", and "Print Friendly". The "Why" section is empty. The "References:" section contains a table with four rows of references. Each row has a "Reference Name", a "URL", and a "Description".

Reference Name	URL	Description
Communicable Disease Epidemiology Program	http://www.colorado.gov/cs/Satellite/CDPHE-DCEED/CBON/1251607754708	
Reporting/submission form URL	http://www.colorado.gov/cs/Satellite/CDPHE-DCEED/CBON/1251607755364	
statute and regulations	http://www.colorado.gov/cs/Satellite?blobcol=urldata&blobheadname1=Content-Disposition%26blobheadname2=Content-Type%26blobheadvalue1=inline%3B+filename%3D%22Epidemic+and+Communicable+Disease+Control+-+6+CCR+1009-1%28amended+11%2F17%2F10%2C+effecti	
Reporting/submission form URL	http://www.colorado.gov/cs/Satellite?blobcol=urldata&blobheadname1=Content-Disposition&blobheadname2=Content-Type&blobheadvalue1=inline%3B+filename%3D%22CDPHE+Communicable+Disease+Reporting+Form.pdf%22&blobheadvalue2=application%2Fpdf&blobkey=id&b	

Working with:

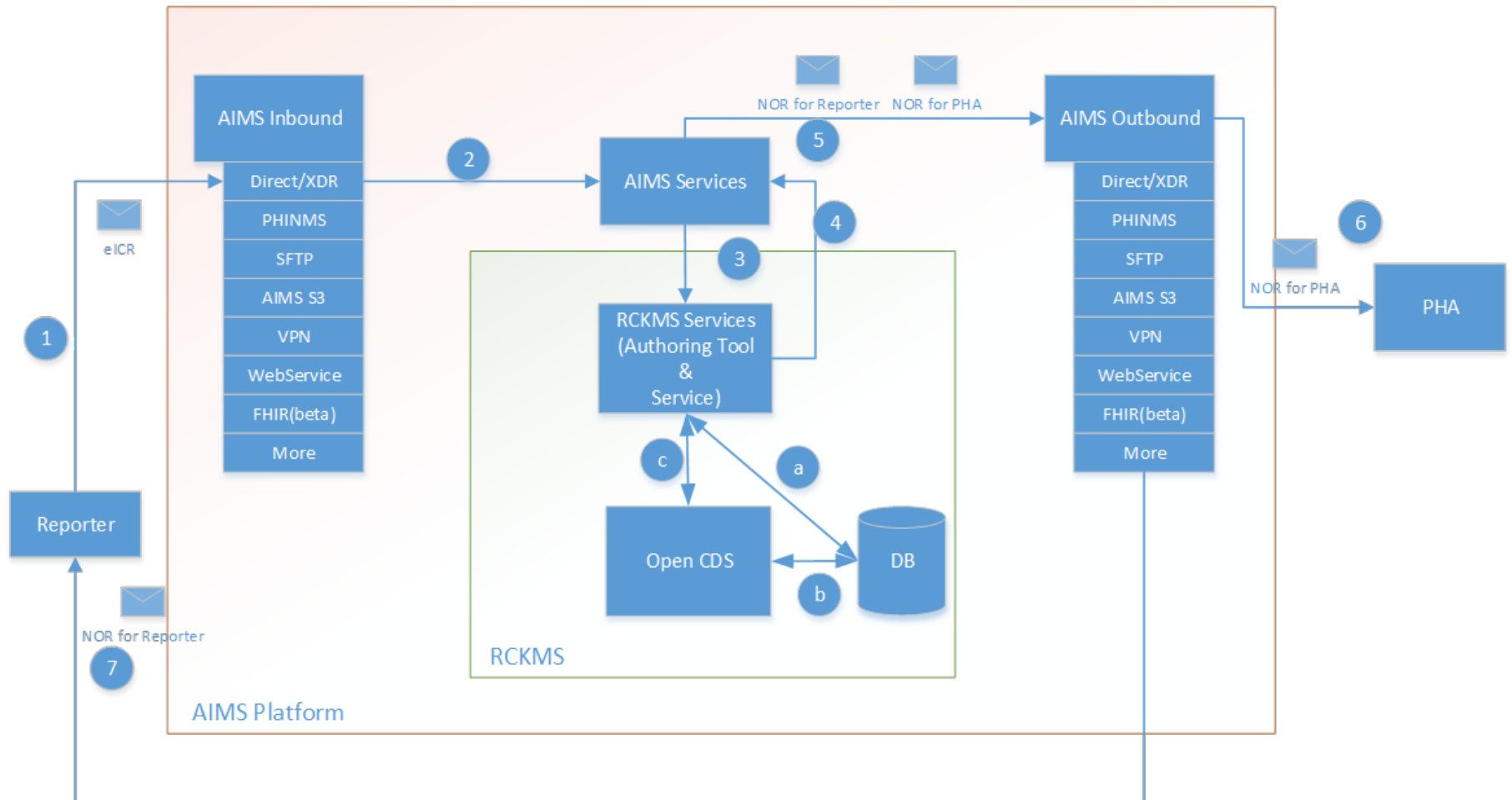
eHealth Exchange™



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eICR Workflow w/ RCKMS



Step 1 - Send

- Example - Direct Protocol
- Compose new message
- Attach eICR
- Send to ecr@...

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Welcome to Direct Secure Messaging

Username

Password

Direct Secure Messaging powered by UberXchange • [Get support](#)



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```
<?xml version="1.0" encoding="UTF-8"?><!--Title: "Sample file for the Salmonella Report"
  Version: Draft
  Revision History: 11/09/2015 pre-publication
  Specification: eICR CDA IG - C-CDA Templates Only
  This sample document was created Eric M Haas, Health eData Inc, on behalf of HL7 PHER Working Group--><!-- The following
  sample document depicts a fictional character's health summary. Any resemblance to a real person is coincidental. --><!--
  To illustrate as many data elements as possible, the clinical scenario may not be entirely plausible. --><!--The schema
  file (CDA_SDTC.xsd) is available at http://gforge.hl7.org/svn/strucdoc/trunk/CDA_SDTC which contains all the SDWG approved
  extensions.--><?xml-stylesheet type="text/xsl" href="../../transform/CDA_EICR.xsl"?>
<ClinicalDocument xmlns="urn:hl7-org:v3" xmlns:voc="urn:hl7-org:v3/voc" xmlns:xsi="http://www.w3.org/2001/XMLSchema-instance"
  xmlns:sdtc="urn:hl7-org:sdtc" xsi:schemaLocation="urn:hl7-org:v3 ../../schema/CDA/infrastructure/cda/CDA_SDTC.xsd">
  <!--
  *****
  CDA Header
  *****
  -->
  <!-- US Realm Header template -->
  <realmCode code="US"/>
  <typeId root="2.16.840.1.113883.1.3" extension="POCD_HD000040"/>
  <!-- Conformant to Initial Public Health Case Report -->
  <templateId root="2.16.840.1.113883.10.20.15.2" extension="2015-11-28"/>
  <!-- globally unique document ID (extension) is scoped by vendor/software -->
  <id root="db734647-fc99-424c-a864-7e3cda82e703"/>
  <!-- Document Code -->
  <code code="55751-2" codeSystem="2.16.840.1.113883.6.1" displayName="Public Health Case report"/>
  <title representation="TEXT" mediaType="text/plain">Initial Public Health Case Report</title>
  <effectiveTime value="20151107094421+0000"/>
  <confidentialityCode code="N" displayName="Normal" codeSystem="2.16.840.1.113883.5.25"/>
  <languageCode code="en-US"/>
  <recordTarget typeCode="RCT" contextControlCode="OP">
  <!--patient demographic information -->
  <patientRole classCode="PAT">
  <!-- Fake root for sample. -->
  <id extension="123453" root="2.16.840.1.113883.19.5"/>
  <!-- SSN-->
  <id extension="444-333-3333" root="2.16.840.1.113883.4.1"/>
  <!-- Could have multiple addresses-->
  <addr use="H">
  <streetAddressLine partType="SAL" representation="TEXT" mediaType="text/plain">2222 Home Street</streetAddressLine>
```

Step 2 – Receive by AIMS Services

Frans de Wet - Mirth Connect Administrator - (3.3.2.7911)

Mirth Connect

Dashboard

Channels

Users

Settings

Alerts

Events

Extensions

Dashboard Tasks

Refresh

Send Message

View Messages

Remove All Messages

Clear Statistics

Pause

Stop

Undeploy Channel

Other

Dashboard

Status	Name	Received	Filtered	Queued	Sent	Errored
Started	AIMSS3 - eCR from DemoEHR1	0	0	0	0	0
Started	AIMSS3 - eCR to RCKMS	1	0	0	1	0
Started	AIMSS3 - eICR from RCKMS	1	0	0	1	0
Started	AIMSS3 - eICR to DemoEHR1	0	0	0	0	0
Started	AIMSS3 - Incoming eCR Messages	0	0	0	0	0
Started	DIRECT - eCR from Cerner	0	0	0	0	0
Started	DIRECT - eCR from Frans	1	0	0	1	0
Started	DIRECT - eICR to Cerner	0	0	0	0	0
Started	DIRECT - eICR to Frans	1	0	0	1	0
Started	DIRECT - Incoming eCR Messages	1	1	0	1	0
Started	eCR - Inbound Processing	1	0	0	1	0
Started	eCR - RCKMS PH Decision Support	1	0	0	1	0
Started	eICR - Outbound Processing	1	4	0	2	0
Started	PHINMSRNR - eCR from DemoEHR2	0	0	0	0	0
Started	PHINMSRNR - Incoming eCR Messages	0	0	0	0	0
Started	PHINMSRNR - To APHL_UT_UDTOH	1	0	0	1	0
Started	SFTP - eCR from DemoEHR3	0	0	0	0	0
Started	SFTP - eICR to DemoEHR3	0	0	0	0	0

- Receive from ecr@... Mailbox monitor
- Process with sender specific transformation rules
- Route to RCKMS (placeholder)

Step 3/4 - RCKMS

Status	Name	Received	Filtered	Queued	Sent
Started	AIMSS3 - eCR from DemoPHR1	0	0	0	0
Started	AIMSS3 - eCR to RCHMS	1	0	0	1
Started	AIMSS3 - eCR from RCHMS	1	0	0	1
Started	AIMSS3 - eCR to DemoPHR1	0	0	0	0
Started	AIMSS3 - Incoming eCR Messages	0	0	0	0
Started	DIRECT - eCR from Corner	0	0	0	0
Started	DIRECT - eCR from Frans	1	0	0	1
Started	DIRECT - eCR to Corner	0	0	0	0
Started	DIRECT - eCR to Frans	1	0	0	1
Started	DIRECT - Incoming eCR Messages	1	1	0	1
Started	eCR - Inbound Processing	1	0	0	1
Started	eCR - RCHMS PH Decision Support	1	0	0	1

- Placeholder – Very Simple Decision Support
- Routes to Jurisdictions based on patient state
- Sends positive results based on problem or test and/or result codes (Eric Haas):

[/ClinicalDocument/component/structuredBody/component/section/entry/act/entryRelationship/observation/value/@code](#)

[/ClinicalDocument/component/structuredBody/component/section/entry/encounter/entryRelationship/act/entryRelationship/observation/value/@code](#)

[/ClinicalDocument/component/structuredBody/component/section/entry/organizer/component/observation/code/@code](#)

[/ClinicalDocument/component/structuredBody/component/section/entry/organizer/component/observation/value/@code](#)

- RCKMS Placeholder sends:
 - Notice of Reportability to Sender (always with yes/no)
 - eICR to appropriate Jurisdiction

Step 5,6 and 7 – Route/Deliver

Name ▲	Received	Filtered	Queued	Sent
AIMSS3 - eCR from DemoEHR1	0	0	0	0
AIMSS3 - eCR to RCKMS	1	0	0	1
AIMSS3 - eICR from RCKMS	1	0	0	1
AIMSS3 - eICR to DemoEHR1	0	0	0	0
AIMSS3 - Incoming eCR Messages	0	0	0	0
DIRECT - eCR from Cerner	0	0	0	0
DIRECT - eCR from Frans	1	0	0	1
DIRECT - eICR to Cerner	0	0	0	0
DIRECT - eICR to Frans	1	0	0	1
DIRECT - Incoming eCR Messages	1	1	0	1
eCR - Inbound Processing	1	0	0	1
eCR - RCKMS PH Decision Support	1	0	0	1
eICR - Outbound Processing	1	4	0	2
PHINMSRNR - eCR from DemoEHR2	0	0	0	0
PHINMSRNR - Incoming eCR Messages	0	0	0	0
PHINMSRNR - To APHL-UT_UTDOH	1	0	0	1

- Receive from RCKMS
- Route Notice of Reportability to Original Sender
- Route eICR to Jurisdiction

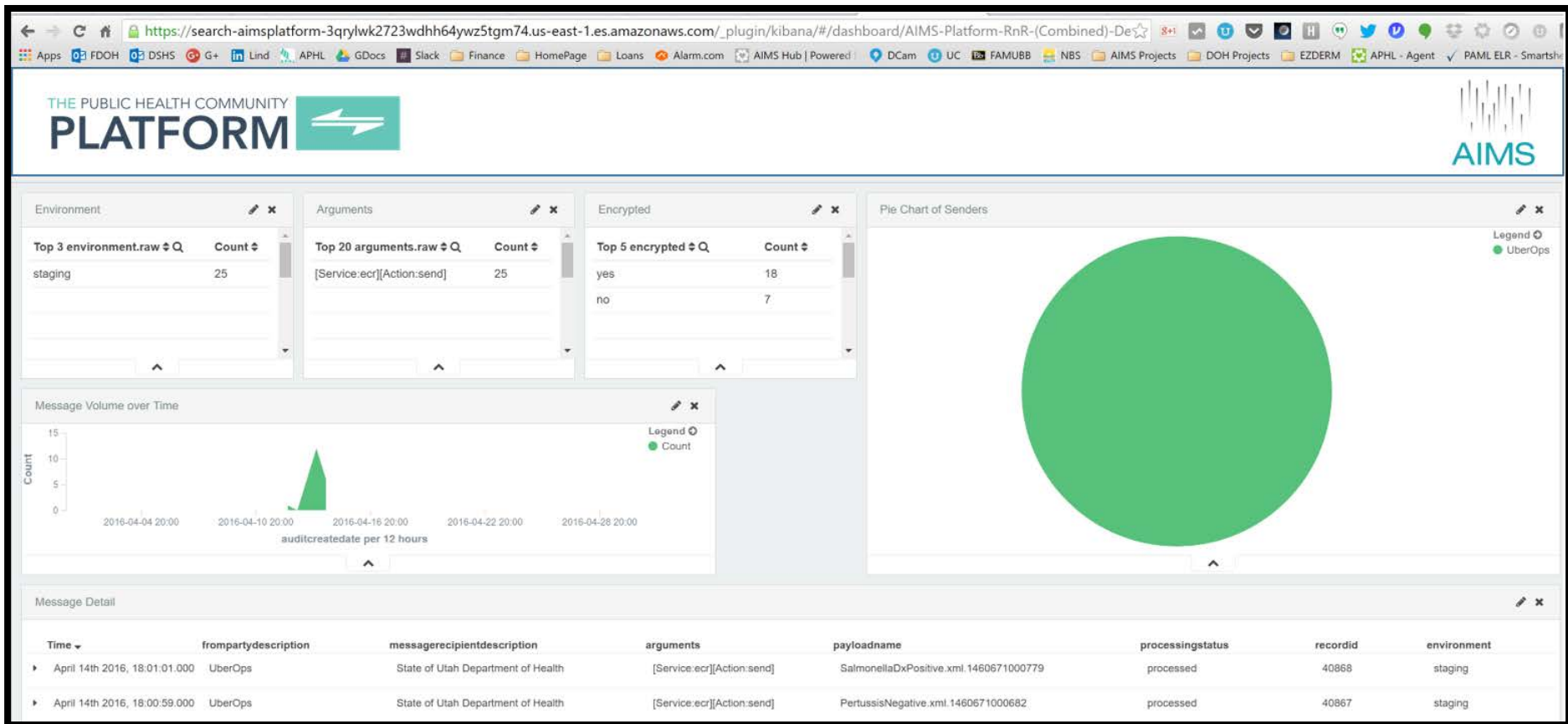


Negative Results

Name ▲	Received	Filtered	Queued	Sent
+ AIMSS3 - eCR from DemoEHR 1	0	0	0	0
+ AIMSS3 - eCR to RCKMS	1	0	0	1
+ AIMSS3 - eICR from RCKMS	1	0	0	1
+ AIMSS3 - eICR to DemoEHR 1	0	0	0	0
+ AIMSS3 - Incoming eCR Messages	0	0	0	0
+ DIRECT - eCR from Cerner	0	0	0	0
+ DIRECT - eCR from Frans	1	0	0	1
+ DIRECT - eICR to Cerner	0	0	0	0
+ DIRECT - eICR to Frans	1	0	0	1
+ DIRECT - Incoming eCR Messages	1	1	0	1
+ eCR - Inbound Processing	1	0	0	1
+ eCR - RCKMS PH Decision Support	1	0	0	1
+ eICR - Outbound Processing	1	5	0	1
+ PHINMSRNR - eCR from DemoEHR 2	0	0	0	0
+ PHINMSRNR - Incoming eCR Messages	0	0	0	0
+ PHINMSRNR - To APHL-UT_UTDOH	0	0	0	0

- Negative Results do not generate an eICR to the jurisdiction
- Do generate a Notice of Reportability (Negative)

Working with: Utah



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Working with: Utah

jects ▶ eICR to Utah via AIMS ▶ eICR-XML

Burn New folder

Name	Date modified	Type	Size
ChlamydiaTestPositive.xml	4/14/2016 3:20 PM	XML File	30 KB
CT-GC-TestPositive.xml	4/14/2016 3:20 PM	XML File	28 KB
Pertussis_Example-old.xml	4/14/2016 3:20 PM	XML File	29 KB
PertussisNegative.xml	4/14/2016 3:20 PM	XML File	32 KB
PertussisPositive.xml	4/14/2016 3:20 PM	XML File	32 KB
SalmonellaDxPositive.xml	4/14/2016 3:20 PM	XML File	27 KB

recordId	messageId	payloadName	p	payload	lo	service	action	argur	fromPartyId	messageRecipient	errorCode	errorMessage
11	FOLDERPOLLING-8b4baf0ea5d6e469a031960f...	Pertussis_Example-old.xml.1460645891995	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
12	FOLDERPOLLING-dad978e1875f011c138c8838...	PertussisPositive.xml.1460645892073	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
13	FOLDERPOLLING-b9028381e982309b26eebdd2...	CT-GC-TestPositive.xml.1460645892104	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
14	FOLDERPOLLING-18dddbb12c71e5969468f026...	ChlamydiaTestPositive.xml.1460645892156	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
15	FOLDERPOLLING-50c4a060ecc56406670b817a...	PertussisNegative.xml.1460645892188	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
16	FOLDERPOLLING-cb9f769feb5e3579cda074c58...	SalmonellaDxPositive.xml.1460645892220	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
17	FOLDERPOLLING-8b4baf0ea5d6e469a031960f...	Pertussis_Example-old.xml.1460671000245	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
18	FOLDERPOLLING-dad978e1875f011c138c8838...	PertussisPositive.xml.1460671000341	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
19	FOLDERPOLLING-b9028381e982309b26eebdd2...	CT-GC-TestPositive.xml.1460671000585	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
20	FOLDERPOLLING-18dddbb12c71e5969468f026...	ChlamydiaTestPositive.xml.1460671000633	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
21	FOLDERPOLLING-50c4a060ecc56406670b817a...	PertussisNegative.xml.1460671000682	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL
22	FOLDERPOLLING-cb9f769feb5e3579cda074c58...	SalmonellaDxPositive.xml.1460671000779	BE	NULL		Router	routeNotReadPoll	[S...	2.16.840.1.114222.4.3.2.2.3.719.52	APHL-UT_UTDOH	success	NULL

Contact Information

Eduardo Gonzalez Loumiet | Project Manager

Uber Operations | eddie@uberops.com | 850-766-5338



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Questions?

Contact:

Marcus Rennick

mrennick@astho.org

Director, Informatics

ASTHO

informatics@astho.org

www.ThePHCP.org

www.astho.org

Continue discussion with EHR
implementers over the
Summer

■ Email

ehrmeaningfuluse@cdc.gov

to request participation